85-3563/

Nova Scotia
Health Services
and
Insurance Commission
Members
March 31, 1984

Chairman
Clemm E. Larsen
Parrsboro

Vice-Chairman

Professor R.G. Murray
Dartmouth

Jean Dobson
Kentville

G.S. Fairn
Middleton

C. Herbert Inness
Port Medway
Effective: March 15, 1984

Dr. Philip Jardine
Musquodoboit Harbour

Mary MacDonald
New Waterford
Effective: December 1, 1983

William MacDonald
Yarmouth

Dr. D.C.T. Macintosh
Halifax

Dr. N.K. MacLennan
Sydney

Dr. Bruce Pretty
Halifax

Major General George Spencer
Chester
Effective: December 1, 1983

Executive Director: J.G. Hare

Executive Secretary: D.H. Waller

Address: P.O. Box 760, Halifax
Telephone: 424-8900

Province of
Nova Scotia

Health Services & Insurance Commission

ANNUAL REPORT

For the year ending March 31, 1984

For the year ending March 31, 1984

CONTENTS

Letters of Transmittal 5, 6

Introduction 7

Highlights 1983-84 8

General Information 9

Comparison of Expenditures 14

Statistical Section 15

To The Honourable Alan R. Abraham, C.D.
Lieutenant-Governor of the Province of Nova Scotia

Sir:

I have the honour to present the Annual Report of the Nova Scotia Health Services and Insurance Commission for the fiscal year ended March 31, 1984.

Your obedient servant,

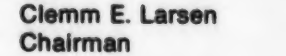
Gerald Sheehy, D.V.M.
Minister of Health

To The Honourable Gerald Sheehy, D.V.M.
Minister of Health
Joseph Howe Building
Halifax, Nova Scotia

Sir:

I have the honour to present the Annual Report of the Nova Scotia Health Services and Insurance Commission for the fiscal year ended March 31, 1984.

Respectfully submitted,



Clemm E. Larsen
Chairman

INTRODUCTION

This is the eleventh annual report of the Health Services and Insurance Commission to the Honourable Minister of Health and is made pursuant to Section 16(1) of the Health Services and Insurance Act.

Programs provided to residents which are the responsibility of the Commission are:

(a) physician services

(b) surgical-dental services in hospital

(c) vision analyses by optometrists

(d) drug program for residents 65 years of age and over

(e) dental services for children born on or after January 1, 1967 to age 16, or for students registered with the School for the Blind

(f) program for sufferers of cystic fibrosis

(g) dental program for patients with cleft lip/cleft palate

(h) drug program for those suffering from diabetes insipidus related to the pituitary gland

(i) program of drugs for cancer patients

(j) prosthetics services program

The Commission consisted of 12 members appointed by the Lieutenant Governor in Council. Twelve regular meetings and one special meeting were held by the Commission during the year. Committees of the Commission met as required throughout the year.

Maritime Medical Care continues to carry out the day-to-day administration of the various programs.

The total number of claims processed under all programs

was 6,721,000 — a 0.4 per cent increase over the previous year.

Total payments increased by 9.0 per cent to $181,303,698.

Detailed financial and statistical data relating to all programs will be found in the statistical section of this report.

HIGHLIGHTS 1983–84

1. The Pharmacy Act was amended to permit voluntary product selection.

2. Dr. N.K. MacLennan and Dr. Bruce Pretty were reappointed as members of the Commission.

3. Mr. Herbert Inness of Port Medway, Mrs. Mary MacDonald of New Waterford, and Major General George Spencer of Marriott's Cove were appointed members of the Commission.

4. The medical tariff was increased by 6 per cent effective April 1, 1983.

5. The professional component of the Pharmacare tariff was increased to $5.40 effective July 1, 1983, and to $5.50 effective January 1, 1984.

6. The dental tariffs under the Children's Dental Plan, Cleft Palate, and Surgical-Dental programs increased by 6 per cent effective April 1, 1983.

7. The optometric tariff was increased by 10.8 per cent effective April 1, 1983.

8. Inquiries were held into submission of irregular claims, and five pharmacies were ordered not to practise under the plan for designated periods; a sixth pharmacy was reprimanded by the Commission.

GENERAL INFORMATION

Legislation

The Health Services and Insurance Commission was established by Chapter 8 of the Statutes of Nova Scotia 1973, the Health Services and Insurance Act.

This Act repealed the Medical Care Insurance Act and the Hospital Insurance Act. The Health Services and Insurance Act was amended by Chapter 2 of the Statutes of 1977, at which time responsibility for the hospital program was deleted from the Commission's responsibility. The Commission continues to provide insurance coverage to Nova Scotia residents for a wide range of services provided by physicians, dentists, optometrists, and pharmacists.

The Commission

The wide range of services provided to residents of Nova Scotia is administered by a Commission consisting of not fewer than 9, or more than 12, members responsible to the Minister of Health. For the year ending March 31, 1984, there were 12 members, including two physicians nominated by the Medical Society of Nova Scotia and two members nominated by the Association of Health Organizations.

Each Commissioner holds office for such term as is prescribed by his or her appointment, and is eligible for reappointment, but shall not hold office for a term or terms exceeding six consecutive years.

A number of changes occurred in the composition of the Commission during the year.

Dr. N.K. MacLennan was reappointed for a further two-year term effective September 1, 1983.

Dr. Bruce Pretty was also reappointed for an additional term of two years effective September 1, 1983.

Mr. C. Herbert Inness, Mrs. Mary MacDonald, and Major

General George Spencer were appointed members of the Commission.

Mr. D.H. Waller continued as Executive Secretary to the Commission, and Mr. J.G. Hare, Q.A., as Executive Director of the Commission.

Responsibilities of the Commission

It is the function of the Commission, and it has power to:

(a) establish a tariff or tariff fees or other system of payment for insured services and, with the approval of the Governor in Council, to authorize payments in respect thereof;

(b) consult with the various societies or associations before establishing or altering any tariff providing for payment of services rendered by the various providers;

(c) interpret tariffs and determine their application to the assessment of claims;

(d) conduct surveys and research in relation to services that are insured under the Act;

(e) perform such other functions as may be assigned to it from time to time by the Governor in Council or the Minister;

(f) do all other acts and things that the Commission considers necessary or advisable for the purpose of carrying out effectively the intent and purposes of this Act.

Funding

The funds to carry out the purposes and functions of the Commission are provided by appropriations from the Legislature, and all services are rendered without the payment of premiums or co-insurance charges imposed by the Commission or the Province, although some individual providers do charge patients over and above the amount paid by the Commission.

Administration

The Executive Director, Mr. J.G. Hare, is responsible to the Commission for the overall direction of the plan. Maritime Medical Care is responsible for the day-to-day administration and for the assessment of claims in respect of insured services in accordance with the tariffs established by the Commission. It is also responsible for paying claims in accordance with the Act and Regulations.

Tariff Development

Under the Act, the Commission has the power and the responsibility to establish a tariff or tariff fees, or other system of payment for insured services. In carrying out this function, it meets with the various societies and/or associations before establishing such tariffs or other method of payment, and then requests approval of the Governor in Council to make payments in respect thereof.

Tariff increases effective during 1983–84 were:

(1) medical tariff — 6 per cent effective April 1, 1983.

(2) professional component of Pharmacare tariff increased to $5.40 effective July 1, 1983, and to $5.50 effective January 1, 1984.

(3) children's dental plan, cleft palate program, and surgical dental tariffs increased 6 per cent April 1, 1983.

(4) optometric tariff — increased by 10.8 per cent effective April 1, 1983, the third year of a three-year agreement.

Registration

Registration of beneficiaries is carried out by Maritime Medical Care, which is reimbursed by the Province for such services as are performed on its behalf.

Eligibility for Benefits

Eligibility for benefits for residents does not depend upon prior

registration. No premiums are required. Eligibility, generally speaking, is based on the family concept, and all unmarried dependents under the age of 18 are registered on the family's registration certificate. Persons 18 years of age are issued with a separate registration card at the start of the month following the month in which they reach their eighteenth birthday.

Newcomers to Nova Scotia are required to register with Maritime Medical Care.

Generally speaking, residents of other provinces moving to Nova Scotia are provided with coverage on the first day of the third month following the month they move to Nova Scotia. Immediate coverage is available for certain special residents on arrival in Nova Scotia. Such special residents would include landed immigrants, discharged members of the Canadian Armed Forces, and returning Canadians (from abroad).

Method of Payment

Usually, the majority of payments are made directly to the provider by the Commission on behalf of the individual, although provision has been made for direct payment to the patient if the provider does not have opted-in status with the Commission. In such instances, payments may be made directly to the patient. This, generally, is the case for services rendered outside Canada or elsewhere within Canada. Provision has been made by the Commission to permit the patient to assign the account to the provider concerned.

Payments made directly by the Commission to the provider will be in accordance with the tariffs established by the Commission, and there may be a difference with the amount charged by the provider. Although the level of payment will vary according to the amount charged by the practitioner, the coverage provided on an out-of-Canada basis for physicians is based on 85 per cent of the comparative fee in Nova Scotia, plus 75 per cent of the balance.

No payments are made with respect to services provided at the request of a third party, or for services deemed unnecessary.

Third Party Recoveries

The Commission attempts to recover amounts paid for medical services rendered as a result of the wrongful act of third parties. This function is carried out on behalf of the Commission by the Departmental Solicitor and the Casualty Claims Examiner, Miss K. Delaney, of the Department of Health, with the assistance of other staff members.

During the fiscal year 1983-84, $117,998.30 in respect to medical services payments was recovered from third parties.

COMPARISON OF EXPENDITURES
For the Years Ended March 31, 1983 and 1984[1]

	March 31 1983	March 31 1984
Payment of Insured Services		
Medical	$124,884,911	$139,376,906
Pharmacy	26,505,260	30,958,506
Children's Dental	10,177,610	10,023,483
Optometric	1,728,371	1,938,087
Cystic Fibrosis	281,844	268,915
Cleft Palate[2]	203,630	190,359
Other[3]	367,750	353,759
TOTAL	$164,149,376	$183,110,015
Administration		
M.M.C.	$ 5,406,709	$ 6,123,276
Other	245,860	283,951
TOTAL	$ 5,652,569	$ 6,407,227
GRAND TOTAL	$169,801,945	$189,517,242

[1]Figures may differ from statistical tables, due to accruals.

[2]Includes Cleft Lip, Cleft Palate.

[3]Prosthetic Services — $317,641.00
Diabetes Insipidus — $ 36,118.00

STATISTICAL TABLES

General

Table 1 M.S.I. Payments Summary 17

Table 2 Five-Year Comparison of Selected M.S.I. Statistics and Annual Percentage Increases 18

Figure 1 Distribution of M.S.I. Payments 19

Physicians' Services

Table 3 Payment and Utilization Summary 20

Table 4 Total M.S.I. Payments for Physicians' Services and Expenditure per Insured Person — Thirteen-year Comparison 21

Table 5 M.S.I. Fee-for-Service Payments — Number of Physicians by Specialty and Payment Range 22

Table 6 Fee-for-Service Payments — Amount Paid by Type of Service 24

Table 7 Fee-for-Service Payments — Services and Amount Paid per 1,000 Insured Persons 25

Table 8 Billing above Tariff by County, General Practitioners and Specialists 26

Dental Services

Table 9 Payment and Utilization Summary 29

Table 9A Payment and Utilization Summary (Special Dental Programs) 30

Table 10 Children's Dental Plan — Amount Paid and Expenditure per Insured Person 30

Table 11 Children's Dental Plan — Utilization Rates and Expenditure per Beneficiary 31

Table 12 Children's Dental Plan — Summary of Services by Age and Type of Service 32

Table 13 Children's Dental Plan — Summary of Amounts Paid by Age and Type of Service 34

Table 14 Distribution of Dentists by Payment Range 36

Table 15 Billing above Tariff by County 37

Optometric Services

Table 16 Payment and Utilization Summary 38

Table 17 Distribution of Optometrists by Payment Range .. 39

Table 18 Billing above Tariff by Region 40

Pharmacare Services

Table 19 Payment and Utilization Summary 41

Table 20 Pharmacare Drug Classification Summary 42

Cystic Fibrosis and Diabetes Insipidus Programs

Table 21 Payment and Utilization Summary 44

TABLE 1
M.S.I. Payments Summary:
12 Months Ending March 31, 1984

	1982-83	1983-84	Per cent Change
Physicians' Services			
Fee-For-Service Payments	$120,760,890	$130,441,210[1]	8.0
Salaried & Sessional Payments	4,749,439	4,904,115	3.3
Total Payments for Physicians' Services	$125,510,329	$135,345,325	7.8
Dentists' Services			
Insured Dental Surgical Services	$ 1,408,524	$ 1,725,580	22.5
Children's Dental Plan	10,311,166	10,835,443	5.1
Cleft Palate & Special Programs	219,441	225,155	2.6
Total Dental Payments	$ 11,939,131	$ 12,786,178	7.1
Optometric Services			
Optometric Plan	$ 1,744,594	$ 1,933,363	10.8
Prescription Drugs			
M.S.I. Pharmacare	$ 26,540,955	$ 30,609,982	15.3
Cystic Fibrosis & Diabetes Insipidus	307,218	315,118	2.5
Prosthetic Services	$ 303,376	$ 313,732	3.4
Total M.S.I. Payments	$166,345,603	$181,303,698	9.0
Administration			
Administrative Expense, Maritime Medical Care Incorporated	$ 5,406,709	$ 6,123,276	13.3
Administrative Expense, as a Percentage of Total Payments	3.3%	3.4%	
TOTAL	$171,752,312	$187,426,974	9.1

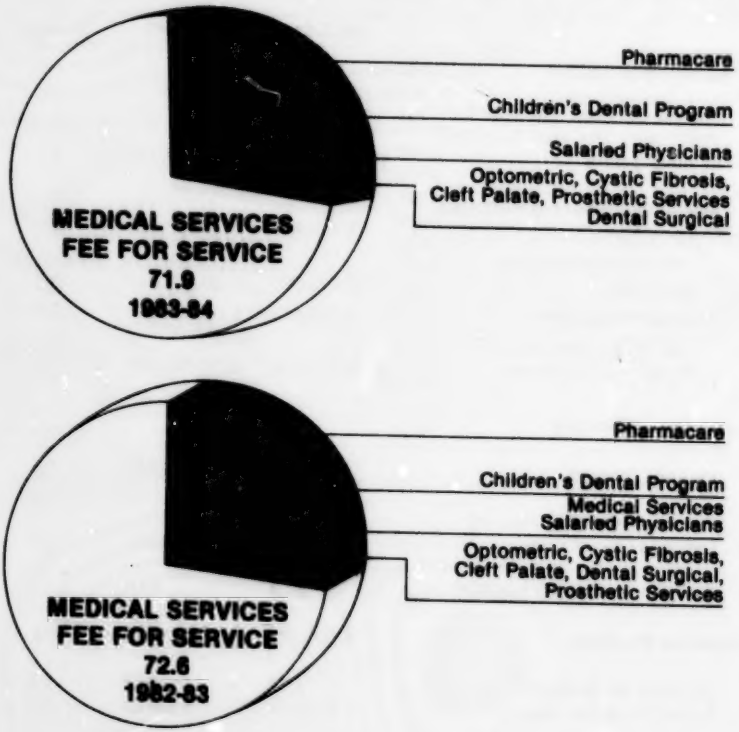
[1]Of the amount shown above for physicians' services, $281,446 for out-of-province hospital out-patient and diagnostic services was transferred to the Department of Health in 1983-84.

TABLE 2
Five-Year Comparison of Selected M.S.I. Statistics and Annual Percentage Increases

	1979–80	1980–81	1981–82	1982–83	1983–84
Insured Population	827,000	831,000	834,000	841,000[1]	849,000
	0.6%	0.7%	0.4%	0.8%	1.0%
Physicians Paid	1,307	1,320	1,386	1,430	1,459
	3.2%	2.0%	5.0%	3.2%	2.0%
Dentists Paid	275	286	288	304	315
	7.4%	4.0%	0.7%	5.6%	3.6%
Optometrists Paid	43	44	45	50	50
Pharmacies Paid	197	203	202	210	219
	3.7%	3.0%	-0.5%	4.0%	4.3%
TOTAL M.S.I. PAYMENTS	$100,636,860	$114,352,972	$134,199,830	$166,345,603	$181,303,698
	12.4%	13.6%	17.4%	24.0%	9.0%
Payments per Insured Person	$121.69	$137.61	$160.91	$197.80	$213.55
	12.0%	13.1%	16.9%	22.9%	8.0%
Claims Processed	5,756,186	5,962,000	6,089,000	6,696,000	6,721,000
	3.9%	3.6%	1.8%	10.3%	0.4%
Administrative Expense	$ 3,856,132	$ 4,298,748	$ 4,852,208	$ 5,406,709	$ 6,123,276
	11.2%	11.5%	12.9%	11.4%	13.3%
Maritime Medical Care Administrative Expense as a Percentage of Total M.S.I. Payments	3.8%	3.8%	3.6%	3.3%	3.4%
Total Number of Maritime Medical Care Employees (March 31)	237	235	244	232	231
	0.9%	-0.8%	3.8%	-4.9%	-0.4%

[1]The estimate of insured population during 1982–83 has been revised from 838,000 to 841,000.

Figure 1
Distribution of M.S.I. Payments



	1982–83	1983–84
Medical Services — Fee for Service	72.6	71.9
— Salaried Physicians	2.9	2.7
Dental Services — Children's Dental Program	6.2	6.0
— Dental Surgical	0.9	1.0
Optometric	1.0	1.1
Pharmacare	15.9	16.9
Cystic Fibrosis	0.2	0.2
Cleft Palate & Special Program	0.3	0.2
	100.0	100.0

TABLE 3
Physicians' Services
Payment and Utilization Summary:
Fiscal 1983–84 Compared with Fiscal 1982–83

	1982–83	1983–84[1]	Change
Payment Summary			
Fee-For-service Payments for Physicians' Services Rendered in Nova Scotia	$118,961,450	$128,748,122	8.2
Physicians' Services Rendered Outside Nova Scotia	1,799,440	1,693,088	-5.9
Total Fee-For-Service Payments	$120,760,890	$130,441,210	8.0
Salaried Physicians	$ 4,749,439	$ 4,904,115	3.3
Total Payments for Physicians' Services	$125,510,329	$135,345,325	7.8
Utilization Summary			
Persons Insured	841,000[4]	849,000	1.0
Persons Receiving Insured Services (Beneficiaries)	739,200	743,886	0.6
Per cent of Persons Insured	87.9	87.6	
Services Rendered	6,005,572	5,976,806	-0.5
Services per Insured[2]	7.14	7.04	-1.4
Expenditure per Insured[3]	$149.24	$159.42	6.8
Services per Beneficiary[2]	8.12	8.03	-1.1
Expenditure per Beneficiary[3]	$169.79	$181.94	7.2

[1]Of the total for physicians' services, $281,446 for out-of-province out-patient and diagnostic services was charged to the Department of Health in 1983–84.

[2]Excludes services performed by physicians under salary arrangement.

[3]Includes payments for salaried physicians' services.

[4]The estimate of insured population during 1982–83 has been revised from 838,000 to 841,000.

TABLE 4
Physicians' Services
Total M.S.I. Payments for Physicians' Services[1] and Expenditure per Insured Person — 1970-71 to 1983-84

	Total Paid	Expenditure per Insured Person	Percentage Change from Previous Year
1970-71	$ 30,190,518	$ 39.16	—
1971-72	32,778,568	42.13	7.4
1972-73	35,975,822	45.82	9.1
1973-74	38,571,411	48.58	5.5
1974-75	44,851,793	55.93	15.0
1975-76	55,348,064	68.25	22.0
1976-77	61,107,306	74.79	9.6
1977-78	65,051,135	79.33	6.1
1978-79	71,091,416	86.28	8.8
1979-80	78,558,897	94.99	10.1
1980-81	88,133,112	106.06	11.7
1981-82	101,879,798	122.16	15.2
1982-83	125,510,329	149.24	22.2
1983-84	135,345,325	159.42	6.8

[1]Includes payments to hospitals and institutions with respect to insured services performed by salaried physicians, as well as fee-for-service payments.

TABLE 5
Physicians' Services
M.S.I. Fee-for-Service Payments
Number of Physicians by Specialty and Payment Range[1]
(1982–83 Compared with 1983–84)

Specialty	Under $25,000		$25,000 -49,999		$50,000 -74,999		$75,000 -99,999		$100,000 -124,000	
	1983[2]	1984[2]	1983	1984	1983	1984	1983	1984	1983	1984
Anesthesia	9	6	5	5	8	11	8	7	15	19
Dermatology	1	1	—	1	1	1	3	2	—	—
General Practice	189	173	94	95	93	89	117	115	126	127
General Surgery[3]	14	17	7	8	7	6	11	9	12	16
Internal Medicine	39	41	19	14	11	16	11	13	9	10
Neurology	1	—	1	2	4	2	1	3	1	—
Neurosurgery	—	—	—	—	—	—	—	—	1	—
Obstetrics & Gynecology	2	2	—	2	6	6	7	7	5	1
Ophthamology	1	1	2	3	3	1	—	1	3	1
Ophthalmology & Otolaryngology	1	1	—	3	1	—	3	—	3	4
Otolaryngology	1	1	—	3	1	—	3	—	3	4
Orthopedic Surgery	1	5	—	—	1	1	—	—	2	2
Pediatrics	21	22	5	6	10	8	3	5	5	3
Physical Medicine	—	1	1	—	1	1	—	1	—	1
Plastic Surgery	1	—	—	—	—	—	—	1	—	—
Psychiatry	23	20	17	12	11	10	7	9	6	10
Radiology	56	55	3	7	4	4	1	—	—	—
Urology	1	1	2	1	—	1	1	2	3	2
Other Specialties[4]	10	7	—	—	—	—	—	—	—	—
TOTAL	371	354	156	159	162	159	174	175	193	198

[1]This table provides data on M.S.I. fee-for-service payments only.
[2]1983 refers to the fiscal year 1982–83 and 1984 refers to the fiscal year 1983–84.
[3]Includes Thoracic Surgery.
[4]Includes Pathology (0) and Public Health (1) in 1983 and Pathology (0) and Public Health (2) in 1984.

TABLE 5 (Continued)
Physicians' Services
M.S.I. Fee-for-Service Payments
Number of Physicians by Specialty and Payment Range[1]
(1982–83 Compared with 1983–84)

Specialty	$125,000 -149,999		$150,000 -174,999		$175,000 -199,999		Over $200,000		Total	
	1982[2]	1984[2]	1983	1984	1983	1984	1983	1984	1983	1984
Anesthesia	7	9	4	—	1	2	—	1	57	60
Dermatology	1	—	—	—	—	—	2	3	8	8—
General Practice	82	98	41	48	21	21	16	24	779	790
General Surgery	10	15	17	10	7	7	19	21	104	109
Internal Medicine	7	4	6	8	3	5	9	11	114	122
Neurology	—	3	1	1	—	—	1	1	10	10
Neurosurgery	1	3	2	1	—	—	1	1	5	5
Obstetrics & Gynecology	9	6	5	9	3	4	3	4	40	41
Ophthamology	3	4	6	7	2	4	9	9	29	31
Ophthalmology & Otolaryngology	—	—	—	—	—	—	—	—	5	5
Otolaryngology	2	2	—	1	1	1	6	6	19	20
Orthopedic Surgery	1	1	1	2	2	2	6	6	14	19
Pediatrics	2	3	3	5	—	—	1	1	50	53
Physical Medicine	1	—	—	—	—	—	2	2	5	6
Plastic Surgery	—	1	1	1	2	2	2	2	6	7
Psychiatry	3	3	2	3	—	—	1	—	70	67
Radiology	1	—	—	1	—	—	—	—	65	67
Urology	1	1	3	3	4	3	2	3	17	17
Other Specialties	—	—	—	—	—	—	—	—	10	7
TOTAL	131	151	92	100	46	51	82	97	1,407	1,444

[1]This table provides data on M.S.I. fee-for-service payments only.
[2]1982 refers to the fiscal year 1982–83 and 1984 refers to the fiscal year 1983–84.
[3]Includes Thoracic Surgery.
[4]Includes Pathology (0) and Public Health (1) in 1983 and Pathology (0) and Public Health (2) in 1984.

TABLE 6
Physicians' Services
Fee-for-Service Payments — Amount Paid by Type of Service

Type of Service	12 Months Ended March 31, 1983 Amount Paid	% of Total	12 Months Ended March 31, 1984 Amount Paid	% of Total	% Change Amount Paid
Consultations	$ 14,492,876	12.0	$ 16,454,017	12.6	6.8
Office Visits	37,063,206	30.7	41,998,919	32.2	0.1
Home Visits	4,313,097	3.6	4,065,033	3.1	-5.8
Hospital Visits	8,225,430	6.8	8,570,616	6.6	4.2
Emergency & Out-Patient Dept. Visits	6,813,332	5.6	7,083,816	5.4	4.0
Intensive Care	1,057,717	0.9	1,155,415	0.9	9.2
Psychiatric Services	5,296,937	4.4	5,704,838	4.4	7.7
Subtotal	$ 77,262,597	64.0	$ 85,000,652	65.2	10.0
Eye Examinations	$ 2,254,520	1.9	$ 2,126,991	1.6	-5.7
Other Diag. & Ther.	7,582,091	6.3	8,209,872	6.3	8.3
Subtotal	$ 9,836,611	8.2	$ 10,336,863	7.9	5.1
Obstetrical Care	$ 4,418,648	3.7	$ 4,370,111	3.4	-1.1
Major Surgery	14,028,759	11.6	14,196,823	10.9	1.2
Minor Surgery	4,244,948	3.5	4,411,840	3.4	3.9
Surgical Assist	1,381,026	1.1	1,399,613	1.1	1.4
Anesthesia[1]	6,808,291	5.6	7,562,941	5.8	11.1
Subtotal	$ 26,463,034	21.8	$ 27,571,217	21.1	4.2
All Other Services[2]	$ 2,780,000	2.3	$ 3,162,368	2.4	13.8
TOTAL	$120,760,890	100.0	$130,441,210	110.0	8.0

[1]Includes dental anesthesia services: 1982-83, $269,224; 1983-84, $303,226.

[2]i.e., amounts paid for out-of-province services, independent consideration, detention fees, and group immunization.

TABLE 7
Physicians' Services
Fee-for-Service Payments:
Services and Amount Paid per 1,000 Insured Persons[1]

Service	Number of Services per 1,000 Insured 12 Months Ended March 31		Amount Paid per 1,000 Insured 12 Months Ended March 31	
	1983	1984	1983	1984
Consultations	349	382	$ 17,233	$ 19,380
Office Visits	3,441	3,430	44,070	49,431
Home Visits	253	225	5,129	4,788
Hospital Visits	1,116	1,065	9,781	10,095
Emergency & Out-patient Dept. Visits	545	550	8,101	8,344
Intensive Care	43	44	1,258	1,361
Psychiatric Services	156	153	6,298	6,719
Subtotal	5,903	5,835	$ 91,870	$100,118
Eye Examinations	102	91	$ 2,681	$ 2,505
Other Diag. & Ther.	473	467	9,016	9,670
Subtotal	575	558	$ 11,696	$ 12,175
Obstetrical Care	184	180	$ 5,254	$ 5,147
Major Surgery	78	75	16,681	16,722
Minor Surgery	155	153	5,048	5,197
Surgical Assist	25	24	1,642	1,649
Anesthesia[2]	113	119	8,095	8,906
Subtotal	371	371	$ 31,466	$ 32,475
All Other Services[2]	109	104	$ 3,306	$ 3,725
TOTAL	7,142	7,029	$143,592	$153,641

[1]Estimates of insured population as of October 1 are shown below. The 1982-83 estimate has been revised.

	1982-83	1983-84
Total Insured Population	841,000	849,000

[2]See notes 1 and 2 on Table 6.

TABLE 8
Physicians' Services
Billing above Tariff by County
General Practitioners and Specialists

Specialty of Physician by County	12 Months Ended March 31, 1983 Physicians	12 Months Ended March 31, 1983 Amount Reported	12 Months Ended March 31, 1984 Physicians	12 Months Ended March 31, 1984 Amount Reported	Percentage[1] Change
Annapolis					
General Practioners	11	$ 68,977	11	$ 71,145	3.1
Specialists	3	7,690	3	9,563	25.5
TOTAL	14	$ 76,667	14	$ 80,706	5.3
Antigonish					
General Practioners	7	$ 376	4	$ 325	—
Specialists	4	1,305	2	6	-99.5
TOTAL	11	$ 1,681	6	$ 331	-80.3
Cape Breton County					
General Practioners	26	$ 3,073	11	$ 402	-86.6
Specialists	7	4,873	6	4,600	-5.6
TOTAL	33	$ 7,946	17	$ 5,002	-37.1
City of Sydney					
General Practioners	20	$ 36,810	16	$ 31,427	-14.6
Specialists	22	102,242	16	91,907	-10.1
TOTAL	42	$139,052	32	$123,334	-11.3
Colchester					
General Practitioners	18	$ 45,611	13	$ 38,031	-16.6
Specialists	5	5,008	3	2,715	-45.8
TOTAL	23	$50,619	16	$ 40,746	-19.5
Cumberland					
General Practitioners	22	$ 79,443	20	$ 66,443	-16.4
Specialists	4	34,468	5	29,497	-14.4
TOTAL	26	$113,911	25	$ 95,940	-15.8
Digby					
General Practitioners & Specialists	19	$ 66,328[2]	17	$ 63,702[2]	-3.9
Guysborough					
General Practitioners	8	20,766	6	20,231	-2.6
Specialists	—	—	—	—	—
TOTAL	8	$ 20,766	6	$ 20,231	-2.6
Halifax County (Excludes Halifax-Dartmouth)					
General Practitioners & Specialists	31	$122,663[2]	27	$120,041	-2.1

TABLE 8 (continued)

Specialty of Physician by County	12 Months Ended March 31, 1983 Physicians	12 Months Ended March 31, 1983 Amount Reported	12 Months Ended March 31, 1984 Physicians	12 Months Ended March 31, 1984 Amount Reported	Percentage[1] Change
Halifax-Dartmouth					
General Practitioners	178	$ 895,880	180	$ 890,941	- 0.5
Specialists	191	983,746	173	945,452	- 3.9
TOTAL	369	$1,879,626	353	$1,836,393	- 2.3
Hants					
General Practitioners	23	$ 57,502	16	$ 56,703	- 1.4
Specialists	3	16,448	3	12,994	-21.0
TOTAL	26	$ 73,950	19	$ 69,697	- 5.8
Inverness					
General Practitioners & Specialists	10	$ 42,174[2]	7	$ 45,083	6.9
Kings					
General Practitioners	42	$ 160,688	42	$ 171,031	6.4
Specialists	17	132,438	19	114,568	-13.5
TOTAL	59	$ 293,126	61	$ 285,599	- 2.6
Lunenburg					
General Practitioners	38	$ 329,491	38	$ 320,531	- 2.7
Specialists	9	82,907	9	84,056	1.4
TOTAL	47	$ 412,398	47	$ 404,587	- 1.9
Pictou					
General Practitioners	21	$ 43,210	16	$ 38,372	-11.2
Specialists	3	$ 47,301	21	$ 40,462	-14.5
TOTAL	24	$ 47,301	21	$ 40,462	-14.5
Queens					
General Practitioners & Specialists	8	$ 48,848[2]	8	$ 51,163[2]	4.7
Richmond					
General Practitioners	3	13	2	49	—
Shelburne					
General Practitioners	8	23,167	5	15,260	-34.1
Victoria					
General Practitioners	5	6,226	4	5,233	-15.9

[1]Percentage changes are not shown where amount reported in the 12 months ending March 31, 1983 was less than $500.

[2]The distribution of billing above tariff by specialty has not been shown where fewer than three physicians billed substantial amounts.

TABLE 8 (continued)

Specialty of Physician by County	12 Months Ended March 31, 1983 Physicians	12 Months Ended March 31, 1983 Amount Reported	12 Months Ended March 31, 1984 Physicians	12 Months Ended March 31, 1984 Amount Reported	Percentage[1] Change
Yarmouth					
General Practitioners	12	$ 37,968	14	$ 36,382	- 4.2
Specialists	9	10,224	5	8,707	-14.8
TOTAL	21	$ 48,192	19	$ 45,089	- 6.4
GENERAL PRACTICE TOTAL	503	$2,071,210	450	$2,029,585	- 2.0
Per Cent of Amount Paid		3.4		3.1	
SPECIALIST TOTAL	284	$1,403,442	256	$1,319,075	- 6.0
Per Cent of Amount Paid		2.4		2.1	
NOVA SCOTIA PHYSICIANS	787	$3,474,652	706	$3,348,660	- 3.6
Per Cent of Amount Paid		2.9		2.6	

[1]Percentage changes are not shown where amount reported in the 12 months ending March 31, 1983 was less than $500.

[2]The distribution of billing above tariff by specialty has not been shown where fewer than three physicians billed substantial amounts.

TABLE 9
M.S.I. Dental Plans
Payment and Utilization Summary

Payment Summary	1982-82	1983-84
Children's Dental & Dental Surgical[1]		
Services in Nova Scotia	$11,708,439	$12,540,064
Services outside Nova Scotia	11,251	20,959
TOTAL	$11,719,690	$12,561,023
Special Dental Programs[2]	$ 219,441	$ 225,155
TOTAL Dental Payments	$11,939,131	$12,786,178

Utilization Summary	Dental Surgical		Children's Dental	
	1982-83	1983-84	1982-83	1983-84
Services Rendered	22,569	26,383	504,392	524,329
Amount Paid[3]	$1,408,524	$1,725,580	$10,311,166	$10,835,443
Persons Insured	841,000	849,000	207,200	209,000
Persons Receiving Insured Services (Beneficiaries)	7,744	8,795	114,376	122,143
Per cent of Persons Insured	0.9%	1.0%	55.2%	58.4%
Services per Insured Person	.03	.03	2.43	2.51
Amount Paid per Insured Person	$1.67	$2.03	$49.76	$51.84
Services per Insured Beneficiary	2.93	3.03	4.41	4.29
Amount Paid per Insured Beneficiary	$182.93	$198.34	$90.21	$88.74

[1]The Children's Dental Plan covers all children under 16 years of age.

[2]Special Dental Programs include services to persons who have a cleft palate; in-hospital services to persons who are severely mentally retarded; and services to children registered at the Halifax School for the Blind who were born prior to 1967. Amounts paid were:

	1982-83	1983-84
Cleft Palate	$202,169	$195,255
Mental Retardation	16,652	29,871
School for the Blind	620	29

Additional information on the Cleft Palate Plan is reported in Table 9A.

[3]Owing to methods of processing data, amounts shown may vary slightly from accounting totals.

TABLE 9A
Special Dental Programs
Payment and Utilization Summary
April 1, 1983 to March 31, 1984

Program	Number of Beneficiaries	Number of Services	Amount Paid
Cleft Palate	437	2,738	$195,255
Mentally Retarded	133	1,063	29,871
Halifax School for the Blind[1]	1	2	29

[1]Persons 16 years of age and over who are attending Sir Frederick Fraser School.

TABLE 10
M.S.I. Children's Dental Plan

Amount Paid and Expenditure per Insured Person[1]
1982-83 and 1983-84

Age	Amount Paid		Expenditure per Insured Person[1]		
	1982-83	1983-84	1982-83	1983-84	% Change
Less Than 1	$ 1,020	$ 704	$ .08	$ .06	-32.5
1	9,128	10,424	.76	.84	10.5
2	71,290	87,250	5.80	7.27	25.4
3	297,439	311,993	24.18	25.16	4.0
4	485,617	506,827	39.48	40.87	3.5
5	651,285	659,688	53.38	53.63	0.5
6	740,174	766,603	58.28	62.84	7.8
7	932,238	949,693	72.27	75.76	4.8
8	947,114	976,513	73.99	75.12	1.5
9	962,628	904,882	71.31	70.69	-0.9
10	892,274	872,824	65.13	64.65	-0.7
11	935,932	826,719	64.11	60.34	-5.9
12	899,072	876,441	62.44	59.62	-4.5
13	886,935	884,139	63.81	61.40	-3.8
14	886,530	924,761	63.32	66.53	5.1
15	693,987	1,164,108	63.09	83.15	31.8
16	18,503	111,874	—	—	—
TOTAL	$10,311,166	$10,835,443	$49.76	$51.84	4.2

[1]Insured population in 1983 is shown in Table 4. Coverage for 16-year-olds terminates at the end of the month during which they reach age 16.

TABLE 11
M.S.I. Children's Dental Plan

Utilization Rates and Expenditure per Beneficiary
April 1, 1983 to March 31, 1984

Age	Insured[1]	Beneficiaries[2]	Utilization Rate	Expenditure per Beneficiary
Less Than 1	12,500	37	0.3	$ 19.03
1	12,400	347	2.8	30.04
2	12,000	1,804	15.0	48.36
3	12,400	5,990	48.3	52.09
4	12,400	7,685	62.0	65.95
5	12,300	8,504	69.1	77.57
6	12,200	9,153	75.0	83.75
7	12,800	9,704	75.8	97.87
8	13,000	9,693	74.6	100.74
9	12,800	9,533	74.5	94.92
10	13,500	9,962	73.8	87.62
11	13,700	9,901	72.3	83.50
12	14,700	10,190	69.3	86.01
13	14,400	9,662	67.1	91.51
14	13,900	9,355	67.3	98.85
15	14,000	10,131	72.4	114.91
16	—	492	—	—
TOTAL	209,000	122,143	58.4	$ 88.71
Ages 3 to 16	172,100	119,955	69.7	$ 89.51

[1]Insured population is the estimated population as of December 1982. Population estimates were derived from Family Allowance data.

[2]Children who received services before and after a birthday are counted as of the younger age. Consequently, the number of children who received services after reaching age 16 may be somewhat higher than shown.

TABLE 12
M.S.I. Children's Dental Plan
Summary of Services by Age and Type of Service
(A) Total Services April 1, 1983 to March 31, 1984[1]

Age	Diagnostic	Preventive	Preventive Orthodontics	Restorative	Oral Surgery	Endodontics[2]	Total
Less Than 1	35	—	—	3	4	—	42
1	354	50	4	55	32	6	501
2	1,944	846	14	874	86	107	3,871
3	6,687	4,157	48	4,079	174	341	15,486
4	9,964	6,042	61	9,322	463	732	26,584
5	12,319	6,840	173	12,643	1,342	1,064	34,381
6	13,707	7,344	391	13,922	2,865	1,003	39,232
7	14,989	7,718	740	17,276	4,242	973	45,918
8	15,254	7,890	813	17,111	4,330	874	46,272
9	15,057	7,820	704	14,624	4,331	629	43,165
10	15,873	8,133	545	12,559	4,674	418	42,202
11	15,612	7,966	344	12,160	4,203	346	40,631
12	16,019	8,152	180	14,894	3,338	331	42,914
13	15,268	7,704	77	16,592	2,281	357	42,279
14	14,285	7,214	38	18,255	1,641	499	41,932
15	15,475	7,713	40	23,578	1,460	624	48,890
16	625	430	8	2,279	89	72	3,503
TOTAL	183,447	96,019	4,180	190,226	35,555	8,376	517,803

[1]Lab fees are not counted as services in this table.

[2]Endodontics includes periodontics and prosthetics in this table.

TABLE 12 (continued)

(B) Percentage Distribution

Age	Diagnostic	Preventive	Preventive Orthodontics	Restorative	Oral Surgery	Endodontics	Total
Less Than 1	—	—	—	—	—	—	—
1	0.2	0.1	0.1	—	0.1	0.1	0.1
2	1.1	0.9	0.3	0.5	0.2	1.3	0.7
3	3.6	4.3	1.1	2.1	0.5	4.1	3.0
4	5.4	6.3	1.5	4.9	1.3	8.7	5.1
5	6.7	7.1	4.1	6.6	3.8	12.7	6.6
6	7.5	7.6	9.4	7.3	8.1	12.0	7.6
7	8.2	8.0	17.7	9.1	11.9	11.6	8.9
8	8.3	8.2	19.4	9.0	12.2	10.4	8.9
9	8.2	8.1	16.8	7.7	12.2	7.5	8.3
10	8.7	8.5	13.0	6.6	13.1	5.0	8.2
11	8.5	8.3	8.2	6.4	11.8	4.1	7.8
12	8.7	8.5	4.3	7.8	9.4	4.0	8.3
13	8.3	8.0	1.8	8.7	6.4	4.3	8.2
14	7.8	7.5	0.9	9.6	4.6	6.0	8.1
15	8.4	8.0	1.0	12.4	4.1	7.5	9.4
16	0.3	0.4	0.2	1.2	0.3	0.9	0.7
TOTAL	100.0	100.0	100.0	100.0	100.0	100.0	100.0

[1]Lab fees are not counted as services in this table.

[2]Endodontics includes periodontics and prosthetics in this table.

TABLE 13
M.S.I. Children's Dental Plan
Summary of Amounts Paid by Age and Type of Service
(A) Amounts Paid April 1, 1983 to March 31, 1984[1]

Age	Diagnostic	Preventive	Orthodontics	Restorative	Oral Surgery	Endodontics[2]	Total
Less Than 1	$ 554	$ —	$ —	$ 72	$ 78	$ —	$ 704
1	6,390	895	479	1,753	709	198	10,424
2	37,793	15,252	1,693	26,501	2,210	3,801	87,250
3	118,835	75,076	5,569	98,264	3,931	10,318	311,993
4	144,332	109,402	5,862	216,683	10,518	20,030	506,827
5	161,769	124,057	17,018	298,134	29,833	28,877	659,688
6	172,552	133,219	38,368	332,035	63,940	26,489	766,603
7	188,126	140,041	76,700	424,300	94,061	26,465	949,693
8	190,865	143,124	86,050	431,554	95,518	29,402	976,513
9	186,678	141,836	74,960	378,091	94,903	28,414	904,882
10	196,947	147,562	59,849	336,598	102,061	29,807	872,824
11	193,437	144,474	39,033	323,670	91,292	34,813	826,719
12	196,460	147,822	20,053	393,373	73,952	42,781	876,441
13	189,240	139,640	8,634	449,724	50,395	46,506	884,139
14	175,382	130,580	4,666	502,164	39,693	72,276	924,761
15	188,825	139,266	4,899	702,898	36,491	91,731	1,164,108
16	7,362	7,694	1,001	81,065	2,238	12,494	111,874
TOTAL	$2,357,567	$1,739,940	$444,834	$4,996,877	$791,823	$504,402	$10,835,443

[1]Lab fees are shown by type of service in this table. They are shown separately in Table 5.

[2]Endodontics includes periodontics and prosthetics in this table.

TABLE 13 (continued)

(B) Percentage Distribution

Age	Diagnostic	Preventive	Preventive Orthodontics	Restorative	Oral Surgery	Endodontics	Total
Less Than 1	—	—	—	—	—	—	—
1	0.3	0.1	0.1	—	0.1	—	0.1
2	1.6	0.9	0.4	0.5	0.3	0.8	0.8
3	5.0	4.3	1.3	2.0	0.5	2.0	2.9
4	6.1	6.3	1.3	4.3	1.3	4.0	4.7
5	6.9	7.1	3.8	6.0	3.8	5.7	6.1
6	7.3	7.7	8.6	6.6	8.1	5.3	7.1
7	8.0	8.0	17.2	8.5	11.9	5.2	8.8
8	8.1	8.2	19.3	8.6	12.1	5.8	9.0
9	7.9	8.2	16.9	7.6	12.0	5.6	8.4
10	8.4	8.5	13.5	6.7	12.9	5.9	8.1
11	8.2	8.3	8.8	6.5	11.5	6.9	7.6
12	8.4	8.5	4.5	7.9	9.3	8.5	8.1
13	8.0	8.0	1.9	9.0	6.4	9.2	8.2
14	7.4	7.5	1.0	10.0	5.0	14.3	8.5
15	8.0	8.0	1.1	14.1	4.6	18.2	10.7
16	0.3	0.4	0.2	1.6	0.3	2.5	1.0
TOTAL	100.0	100.0	100.0	100.0	100.0	100.0	100.0

TABLE 14
M.S.I. Dental Plans
Distribution of Dentists by Payment Range
1982–83 and 1983–84

	Less than $10,000		$10,000 -19,999		$20,000 -29,999		$30,000 -39,999		$40,000 -49,999		$50,000 -99,999		$100,000 and Over		Total	
	83	84	83	84	83	84	83	84	83	84	83	84	83	84	83	84
Children's Dental																
General Practitioners	64	65	52	49	25	30	27	22	24	29	66	74	9	10	267	279
Specialists	20	18	5	8	4	3	1	—	1	—	3	1	2	2	36	32
TOTAL	84	83	57	57	29	33	28	22	25	29	69	75	11	12	303	311
Dental Surgical																
General Practitioners	37	40	3	2	—	—	—	—	—	—	—	—	—	—	40	42
Specialists	4	3	—	—	—	1	—	—	1	—	—	—	7	9	12	13
TOTAL	41	43	3	2	—	1	—	—	1	—	—	—	7	9	52	55

TABLE 15
M.S.I. Dental Plans
Dentists Billing Above Tariff by County[1]

County[2]	Fiscal 1982–83 Dentists[3]	Fiscal 1982–83 Amount Billed Above Tariff	Fiscal 1983–84 Dentists[3]	Fiscal 1983–84 Amount Billed Above Tariff
Annapolis	3	$ 93	1	$ 3
Antigonish	5	13,070	5	16,988
Cape Breton	10	18,186	9	15,139
Colchester	9	36,243	8	26,665
Cumberland	3	7,116	3	6,029
Halifax	64	218,462	51	138,190
Hants	2	1,438	3	418
Inverness	2	6,413	2	5,454
Kings	11	24,668	11	25,171
Lunenburg	11	51,033	12	55,865
Pictou	9	35,949	8	27,031
Richmond & Victoria[4]	—	-9	2	11
Yarmouth & Shelburne[4]	—	—	2	2
TOTAL	129	$412,662	117	$316,966

[1]Includes Children's Dental Plan and Dental Surgical Plan.

[2]No billing above tariff was reported in counties that are not shown.

[3]Dentists who billed above tariff.

[4]Certain counties were combined to preserve confidentiality.

TABLE 16
Optometric Services
Payment and Utilization Summary

	1982-83	1983-84	Percentage Change
PAYMENT SUMMARY			
Payments to Optometrists in Nova Scotia	$1,738,661	$1,926,286	10.8
Out-of-Province	5,933	6,949	17.1
TOTAL	$1,744,594	$1,933,235	10.8
UTILIZATION SUMMARY			
Services Rendered	94,750	94,799	0.1
Persons Insured[1]	841,000	849,000	1.0
Persons Receiving Services (Beneficiaries)	92,175	92,638	0.5
Percentage of Persons Insured	11.0	10.9	
Services per 1,000 Insured	113	112	-0.9
Expenditure per 1,000 Insured	$ 2,074	$ 2,277	9.8
Services per 1,000 Beneficiaries	1,028	1,023	-0.5
Expenditure per 1,000 Beneficiaries	$ 18,926	$ 20,868	10.3

[1]Population estimates from Statistics Canada as of October 1, 1982 and 1983. Excludes 14,000 individuals employed in Canadian Armed Forces or RCMP. The insured population estimate during 1982-83 has been revised from 836,000 to 841,000.

TABLE 17
Optometric Services
Distribution of Optometrists by Payment Range[1]
1982–83 and 1983–84

	Less than $10,000		$10,000 -19,999		$20,000 -29,999		$30,000 -39,999		$40,000 -49,999		$50,000 and Over		Total	
Location	83	84	83	84	83	84	83	84	83	84	83	84	83	84
Urban	3	1	4	5	6	4	3	5	3	5	5	5	24	25
Rural	3	2	4	5	5	2	3	4	3	4	8	8	26	25
TOTAL	6	3	8	10	11	6	6	9	6	9	13	13	50	50

TABLE 18
Optometric Services
Billing above Tariff, by Region[1]

Region	Fiscal Year 1982-83		Fiscal Year 1983-84		Per Cent Change
	Number of Optometrists[2]	Total Billed	Number of Optometrists[2]	Total Billed	
Halifax-Dartmouth	13	$ 87,515	13	$ 92,724	6.0
Sydney	4	55,002	6	60,207	9.5
Subtotal Urban	17	142,517	19	152,931	7.3
Central-North: Cumberland, Colchester, Kings, Hants	8	33,078	8	36,061	9.0
Western: Annapolis, Digby, Yarmouth	4	20,114	3	19,135	- 4.9
South Shore: Lunenburg, Queens	4	26,924	6	33,753	25.4
Central-East: Halifax, Pictou	4	34,486	4	33,550	- 2.7
Cape Breton: Cape Breton County, Inverness	5	20,858	4	20,494	- 1.7
Subtotal Rural	25	135,460	25	142,993	5.6
TOTAL	42	$277,977	44	$295,924	6.5

[1]No billing above tariff was reported in Cumberland and Yarmouth counties during 1983-84. There were no optometrists in Antigonish, Guysborough, Shelburne, Richmond, and Victoria counties.

[2]Number of optometrists who reported billing above tariff.

TABLE 19
M.S.I. Pharmacare
Payment and Utilization Summary
April 1, 1983 to March 31, 1984

	1982-83	1983-84	Per Cent Change
Payment Summary			
Payments for Prescriptions Dispensed			
by participating pharmacies	$25,624,041	$29,609,022	15.6
by other providers	392,707	405,086	3.2
by providers outside Nova Scotia	46,922	50,103	6.8
	$26,063,370	$30,064,211	15.3
Homes for Special Care[1]	$ 477,285	$ 545,771	14.3
TOTAL	$26,540,955	$30,609,982	15.3
Utilization Summary			
Persons Insured	96,000	99,000	3.1
Persons Receiving Insured Services (Beneficiaries)	87,647	89,541	2.2
Percentage of Persons Insured	91.3	90.4	
Prescriptions Dispensed	1,843,015	1,903,784	3.3
Prescriptions per Insured	19.2	19.2	
Expenditure per Insured	$ 276.47	$ 303.68	9.8
Prescriptions per Beneficiary[2]	21.0	21.3	
Expenditure per Beneficiary[2]	$ 297.37	$ 335.76	12.9

[1]Special payment arrangements are in effect for residents of certain Homes for Special Care. These include reimbursement of drug costs and payments for pharmacy services on a sessional or capitation fee basis.

[2]Excludes persons residing in Homes for Special Care.

TABLE 20
Pharmacare Prescriptions and Amount Paid
April 1, 1983 to March 31, 1984
by Drug Classification

	Drug Classification	Number of Prescriptions	Per Cent of Total	Amount Paid	Per Cent of Total
04	Antihistaminics	10,692	0.6	$ 120,454	0.4
08	Anti-Infective Agents	96,872	5.1	1,310,746	4.3
10	Anti-Neoplastic Agents	3,519	0.2	257,771	0.8
12	Autonomic Agents	58,732	3.1	957,754	3.2
16	Blood Derivatives	4	—	33	—
20	Blood Formation & Coagulation	17,603	0.9	172,080	0.6
24	Cardiovascular Drugs	384,000	20.2	6,566,689	21.8
28	Central Nervous System Drugs				
0400	General Analgesics	952	0.1	8,764	—
0800	Analgesics	230,993	12.1	4,984,087	16.5
1200	Anticonvulsants	14,783	0.8	115,449	0.4
1600	Psychotropics	68	—	1,130	—
1604	Antidepressants	43,694	2.3	750,516	2.5
1608	Tranquillizers	106,743	5.6	1,124,627	3.7
1612	Other Psychotropics	777	—	7,104	—
2000	Central Nervous System Stimulants	1,488	0.1	27,437	0.1
2400	Sedatives and Hypnotics	84,180	4.4	812,896	2.7
	Subtotal — Class 28	483,678	25.4	7,812,010	26.0

TABLE 20 (Continued)

	Drug Classification	Number of Prescriptions	Per Cent of Total	Amount Paid	Per Cent of Total
36	Diagnostic Agents	39	—	$ 194	—
40	Diuretics and Potassium Replacement Agents	291,476	15.3	3,403,919	11.3
48	Cough Preparations	22,452	1.2	288,714	1.0
52	Eye, Ear, Nose & Throat Preparations	70,162	3.7	981,814	3.3
56	Gastrointestinal Drugs	94,082	4.9	2,355,145	7.8
60	Gold Compounds	305	—	17,567	0.1
64	Heavy Metal Antagonists	324	—	12,850	—
68	Hormones & Substitutes	118,521	6.2	1,434,585	4.8
72	Local Anesthetics	20	—	64	—
76	Oxytocics	11	—	235	—
77	Diabetic Supplies	33,194	1.7	349,879	1.2
80	Vaccines	71	—	1,064	—
84	Skin & Mucous Membrane Preparations	56,692	3.0	817,309	2.7
86	Spasmolytics	30,357	1.6	476,882	1.6
88	Vitamins & Minerals	19,418	1.0	233,855	0.8
8885	Ostomy Equipment	9,316	0.5	270,697	0.9
92	Unclassified Therapeutic Agents	84,392	4.4	1,995,660	6.6
99	Compounds	14,549	0.8	208,311	0.7
	Other	3,523	0.2	17,930	0.1
	TOTAL	1,903,784	100.0	$30,064,211	100.0

TABLE 21
Cystic Fibrosis and Diabetes Insipidus Programs
Payment and Utilization Summary
April 1, 1983 to March 31, 1984

	1982-83	1983-84
Payment Summary		
Cystic Fibrosis		
Drugs	$239,873	$247,445
Equipment	30,971	31,470
TOTAL	$270,844	$278,915
Diabetes Insipidus	$ 36,374	$ 36,118
Utilization Summary		
Cystic Fibrosis		
Insured Persons	127	146
Expenditure per Insured Person	$ 2,133	$ 1,910
Diabetes Insipidus		
Insured Persons	46	45
Expenditure per Insured Person	$ 791	$ 803